

NSIP Adjusted Meal Counts Schedule

Area Agency on Aging:
Street Address:
City, State, ZIP:

PSA No.:
Contract No.:
Fiscal Year:

Month	(a) III C-1 Meals per CDA 298	(b) III C-1 Changes	(c) Final III C-1 Meal Count	(d) III C-2 Meals per CDA 298	(e) III C-2 Changes	(f) Final III C-2 Meal Count
July						
August						
September						
October						
November						
December						
January						
February						
March						
April						
May						
June						
Total Meals						

Instructions:

1. Copy meal counts from the CDA 298 into column (a) for III C-1 and column (d) for III C-2.
2. List the changes to the number of meals to be reported for each month in column (b) for III C-1 and column (e) for III C-2. List increases or decreases.
3. For each month, total across column (a) and column (b) and enter the total in column (c).
4. For each month, total across column (d) and column (e) and enter the total in column (f).
5. Submit a Detailed Data Expenditure File (SPR 107) with the new meal count for each month with changes.
6. On the **Total Meals** line, add down each column and enter the total.

If no changes are necessary, mark X in the "No Changes Required" box below.

☐ No Changes Required

I hereby certify to the best of my knowledge and belief that these meal counts reflect the total NSIP eligible meals served for the appropriate fiscal year.

Signature of Area Agency on Aging Director	Printed Name	Date
Signature of Fiscal Officer	Printed Name	Date